PATENT APPLICATION FEE DETERMINATION RECORD 09/86/5/4												
Effective October 1, 2000								D8(श्टार्	4	80001	147-1
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN		OR	OTHER SMALL	
TOTAL CLAIMS			20)				RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minu	us 20=	. 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 min	us 3 =	.0			X40=	•	ÖR	X80=	
MUL	TIPLE DEPEN	DENT CLAIM PR	RESENT					405			.070	
* If the difference in column 1 is less than zero, enter "0" in column 2						5	+135=		OR	+270=		
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	411
17205 (Column 1) (Column 2) (Column 3)								SMALLE	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	• 19	Minus	• 0	M	= /		X\$ 9=	1	OR	X\$18=	. /
ME	Independent	• 3	Minus	***	3	= /		X40= `		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	7	OR	+270=	
								TOTAL ADDIT, FEE	-L	OR	TOTAL ADDIT, FEE	/
		(Column 1)			mn 2)	(Column 3)	_	ADDIT. PEE		•	ADDII. FEE	
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	•	Minus	**		-		X\$ 9=		OR	X\$18=	
W	Independent	•	Minus	***	=			X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JULIPLE DEF	ENDEN	I CLAIM		1	+135=	<u>.</u>	OR	+270=	
						•		TOTAL	_	OR	TOTAL	
	· .	(Column 1)		(Colu	mn.2)	(Column 3)		ADDIT. FEE		8	ADDIT. FEE	
AMENDMENT C	b ob objective	CLAIMS REMAINING AFTER AMENDMENT		HIG NUA PREV	HEST MBER HOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	·	Minus	***	,	=		X40=	-	OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	405	,	1	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=	,	OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The Highest Nu	mber Previously Pa	ald For (Total o	r indepen	dent) is th	e highest numb	er fo	und in the ap	propriate bo	x iņ a	olumn 1.	
500	M PTO-875											

FORM PTO-875 (Rev. 8/00)

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